ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	E A .		10-17-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	10-	12	10/7:12.
FORMALITY REVIEW	TR	2C 1108	11.14.01
RESPONSE FORMALITY REVIEW		1 - 11 - 11	1, , , , , ,

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	ł	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	Date	Claim Date	Claim Date		
Final Original		g	a l		
Final		Pinal Original Original	Final		
10/1/2		51	101		
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			103		
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6 3	┤┤┤┤ ┤	56	106		
 	 	57	107		
8 11 1	┤┤┤┤┤┤ ┤	58	108		
9	┪┈┧╌╏╶╏╶╏┈ ┨	59	109		
10		60	110		
111 1	╁╏╅╍┝╍ ┼╸┤╸┞	61	111		
12	┤ 	62	112		
13		63	113		
14		64	114		
15	┤┈┝═╏═╏ ═┦╾┦╾┦	65	115		
16	┤╏╏	66	116		
17		67	117		
18		68	118		
19		69	119		
20		70	120		
21		71	121		
22	 	72	122		
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25		75	125		
26		76	126		
27		77	127		
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41		91	141		
42		92	142		
43		93	143		
44	 	94	144		
45		95	145		
46	 	96	146		
47	 	97	147		
48	╀╂┼┼┼┼┼┼┼┼	98	148		
49	 	99	149		
50		100	150		

If more than 150 claims or 10 actions staple additional sheet here

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GP/112